4-13-01



PTO/SB/05 (2/98) ed for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UTILITY **PATENT APPLICATION TRANSMITTAL**

(Only for new nonprovisional applications under 37C.F.R. §1 53(b))

 \mathbf{v} Please type a plus sign (+) inside this box $\rightarrow \overline{\mathbf{L}}$

PC10887AJAK Attorney Docket No. First Named Inventor or Application Identifier Maria S. Brown, et al. Microbial Reductase Useful For The Stereoselective Reduction of a Title Racemic Tetralone EL710829745US Express Mail Label No

	APPLICATION ELEMENTS		ADDRESS TO:		ommissioner for Pate	ets 📑	
See MPEP chap	oter 600 concerning utility patent application contents.		ADDRESS TO:	Box Patent Washington	Application n, DC 20231	ia a	
(Sub	Fee Transmittal Form (e.g., PTO/SB/17) omit an original, and a duplicate for fee processing) Specification [Total Pages 39]	6. 7.	Microfiche Com Nucleotide and/or Am (if applicable, all nece	ino Acid Seq		3/8340 9/8340	
	referred arrangement set forth below) Descriptive title of the Invention Cross References to Related Applications		a. Compu	ter Readable	Copy al to computer copy)	310	
-	Statement Regarding Fed sponsored R&D Reference in Microfiche Appendix					l)	
-	Background of the Invention	c. Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS					
_	Brief Summary of the Invention	8.			sheet & document(s)))	
- -	 Brief Description of the Drawings (if filed) Detailed Description Claim(s) 	9.	Barres of Attornor				
-	Abstract of the Disclosure	10.	English Translation Document (if applicable)				
3. D	rawing(s) (35 U.S.C. 11.3)[Total sheets]	11.	Information Dis		× Copies of Citations	IDS	
4. 🖸 O	ath or Declaration [Total pages 3]	12.	Preliminary Am	nendment			
	Newly executed (original or copy)	13.	Return Receipt				
t	Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]	14.	*Small Entity Statement(s) (PTO/SB/09-1.	Statu	ement filed in prior a s still proper and de		
	i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).	15.	Certified Copy (if foreign prior			į	
The enti	ncorporation By Reference (useable if Box 4b is checked) re disclosure of the prior application, from which a the oath or declaration is supplied under Box 4b, is red to be part of the disclosure of the accompanying ion and is hereby incorporated by reference therein.	14.	Other: Pri	ority Claim			
		ccc	TE FOR ITEMS 1 & 14: IN ORE S, A SMALL ENTITY STATEM NE FILED IN A PRIOR APPLIC	ENT IS REQUIRE	ED (37 C.F.R. & 1.27), EXU	EPI	
17. If a CC	ONTINUING APPLICATION, check appropriate box, and s						
c	Continuation Divisional Continuation	n-in-pa	art (CIP) of prid	or application	No:/		
Prior a	application information: Examiner			Group/Art U	Init:		
		PON	DENCE ADDRESS				
Custome	(Insert Customer No. or Att	ach bar	r code label here) or	Correspo	ondence address below	/	
Name	Gregg C. Benson						
Address	Pfizer Inc.						
Address	Patent Department, MS 4159, Eastern Point Road				T 000 10		
City	Groton State		CT	Zip Code	06340	-	
Country	United States Of America Telephone	т	1-(860)-441-4901	(Agent)	1-(860)-441-5221 40,049		
NAME (FINILITY)							
Signa	UTILITY TRANSMITTAL PTO SB 05, 9/99, (1/1)						

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Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 2000.

Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

lete if Known Application Number To Be Assigned Herewith Filing Date Maria S. Brown, et al. First Named Inventor To Be Assigned Examiner Name Group/Art Unit To Be Assigned PC10887AJAK Attorney Docket No.

Total Amount of Payme	Attorney				CHI ATION (continued)		
METHOD				FEE CA	LCULATION (continued)		
1. The commission	3. ADDITI						
	indicated fees and credit any over payments to:			Large Entity Small Entity			
Deposit Account Number 16-1445		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description F	ee Paid
Deposit Account Name Pfizer Inc.		105	130	205	65	Surcharge – late fee or oath	
Name Charge Any Additional Charge the Issue Fee Set in			50	227	25	Surcharge-late provisional filing fee or cover sheet	
Charge Any Additional 37 Fee Required Under	37 C.F.R. § 1.1.8 at the Mailing	139	130	139	1 30	Non-English specification	
C.F.R. §§ 1.1.6 and 1.17	of the Notice of Allowance.	147	2,520	147	2,520	For filing a request for reexamination	
2. Payment Enclose	112	920*	112	920*	Requesting publication of SIR prior to Examiner action		
Check Mo	oney Order	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
FI	E CALCULATION	115	110	215	55	Extension for reply within first month	
1. BASIC FILING FEE		116	390	216	195	Extension for reply within second month	
		117	890	217	445	Extension for reply within third month	
Large Entity Small En Fee Fee Fee Fe Code (\$) Code (\$	e Fee Description Fee Paid	118	1,390	218	695	Extension for reply within fourth month	
	55 Utility filing fee 710.00	128	1,890	228	945	Extension for reply within fifth month	
106 320 206 1	60 Design filing fee	119	310	219	155	Notice of Appeal	
107 490 207 2	45 Plant filing fee	120	310	220	155	Filing a brief in support of an appeal	
108 710 208 3	55 Reissue filing fee	121	270	221	135	Request for oral hearing	
114 150 214 7	75 Provisional filing fee	138	1,510	138	1,510	Petition to institute a public use proceeding	
SUBT	140	110	240	55	Petition to revive - unavoidable		
2. EXTRA CLAIM FEES	37,12 (1) (4)	141	1,240	241	620	Petition to revive - unintentional	
2. EXTINA GEAINITEE	Extra Fee from Claims below Fee Paid	142	1,240	242	620	Utility issue fee (or reissue)	
Total Claims 2 -20*		143	440	243	220	Design issue fee	
Independent 1 - 3*	- 0 x 80 = 0	144	600	244	300	Plant issue fee	
Claims Multiple Dependent	= 0	122	130	122	130	Petitions to the Commissioner	
** or number previously paid	123	50	123	50	Petitions related to provisional applications		
Fee Fee Fee	Fee Fee Description	126	240	126	240	Submission of Information Disclosure Statement	
	(\$) 9 Claims in excess of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)	
102 80 202	Independent claims in excess of 3	146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	'
104 270 204 1	35 Multiple dependent claim, if not paid	149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))	
109 80 209 4	**Reissue independent claims over original patent	1	ee (spec	•			
110 18 210 9 **Reissue claims in excess of 20 and over original patent			Other Fee (specify)				
s	*Reduce	ed by Ba	sic Filing	Fee Paid	SUBTOTAL (3) (\$)	0	
SUBMITTED BY					Complete (if Applicable)		
					Reg. Number 40,049		
Signature	Jennifer A. Kispert	Date Y~12				Deposit Account 16-1445 User ID	
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